ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY



W-03514A Payson Water Co., Inc. P.O. Box 82218 Bakersfield, CA 93380

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AZ CORP COMM Director Utilities

ANNUAL REPORT

FOR YEAR ENDING

12 31 2007

FOR COMMISSION USE

ANN04

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COMPANY INFORMATION

Company Name (Business Name): Payson Water Co., Inc.

Mailing Address:

P.O. Box 82218

(Street)

Bakersfield

CA

93380

(City)

(State)

(Zip)

800-270-6084 or 661-633-7546

800-748-6981

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Pager/Cell No. (Include Area Code)

Email Address:

customerservice@brookeutilities.com or mistiej@brookeutilities.com

Local Office Mailing Address:

1010 S. Stover Rd.

Payson

Arizona

85541

(City)

(State)

(Zip)

928-447-8130

928-472-8747

Local Office Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Pager/Cell No. (Include Area Code)

Email Address

davida@brookeutilities.com

MANAGEMENT INFORMATION

Management Contact: Robert T. Hardcastle

Managing Member

(Name)

(Title)

P.O. Box 82218

Bakersfield (City)

CA (State) 93380 (Zip)

661-633-7526

(Street)

800-748-6981

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Pager/Cell No. (Include Area Code)

Email Address: rth@brookeutilities.com

On Site Manager:

David Allred

(Name)

1010 S. Stover Rd.

Payson

85541

(Street)

(City)

(State)

(Zip)

928-447-8130

928-472-8747

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Pager/Cell No. (Include Area Code)

Email Address:

davida@brookeutilities.com

Please mark this box if the above address(es) have changes or are updated since the last filing.

Statutory Agent: Robert T. Ha (Name)	rdcastle				
, , ,	Bakersfield CA	93380			
(Street)	(City) (State)	(Zip)			
661-633-7526 Telephone No. (Include Area Code)	800-748-6981 Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)			
receptione No. (menute Area Coue)	rax No. (menude Area Code)	ragencen No. (menue Area Code)			
Attorney: Jay Shapiro with Fer (Name)	nemore Craig				
3003 N. Central Ave. Ste. 2600 (Street)	00 Phoenix AZ 85012 (City) (State) (Zip)				
602-916-5000	602-916-5566	· -			
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)			
Email Address JLShapiro@fclaw.com	n				
⊠ Please mark this box if the ab	ove address(es) have changed or OWNERSHIP INFORMA	r are updated since the last filing.			
Check the following box that applie	es to your company:				
☐ Sole Proprietor (S)	C Corporation	(C) (Other than Association/Co-op)			
Partnership (P)	☐ Subchapter S C	orporation (Z)			
☐ Bankruptcy (B)	Association/Co-	op (A)			
Receivership (R)	🔀 Limited Liabilit	y Company			
Other (Describe)					
	COUNTIES SERVE	<u>D</u>			
Check the box for the county/ies in	which you are certified to provide	e service;			
АРАСНЕ	☐ COCHISE	COCONINO			
⊠ GILA	☐ GRAHAM	GREENLEE			
☐ LA PAZ	☐ MARICOPA ☐ MOHAVE				
☐ NAVAJO	☐ PIMA	☐ PINAL			
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUMA			
STATEWIDE	STATEWIDE				

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	O.C.L.D
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization	300	256	44
302	Franchises			
303	Land and Land Rights	22,391	13,393	8,998
304	Structures and Improvements	212,082	132,694	79,388
307	Wells and Springs	355,575	227,969	127,606
311	Pumping Equipment	222,684	99,521	123,163
320	Water Treatment Equipment	13,265	4,975	8,290
330	Distribution Reservoirs and Standpipes	359,691	171,025	188,666
331	Transmission and Distribution Mains	597,066	383,347	213,719
333	Services	111,038	77,494	33,544
334	Meters and Meter Installations	263,297	96,412	166,885
335	Hydrants	1,589	528	1,061
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment	413,592	281,291	132,301
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment	7,666	1,968	5,698
346	Communication Equipment	12,576	991	11,585
347	Miscellaneous Equipment			
348	Other Tangible Plant	665	131	534
	TOTALS	2,593,477	1,491,995	1,101,482

This amount goes on the Balance Sheet Acct. No.108

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization	300	2.76%	8
302	Franchises			
303	Land and Land Rights	22,391	3.12%	699
304	Structures and Improvements	212,082	3.09%	6,558
307	Wells and Springs	355,575	3.16%	11,249
311	Pumping Equipment	222,684	2.80%	6,244
320	Water Treatment Equipment	13,265	3.04%	403
330	Distribution Reservoirs and Standpipes	359,691	3.12%	11,210
331	Transmission and Distribution Mains	597,066	3.14%	18,747
333	Services	111,038	3.13%	3,478
334	Meters and Meter Installations	263,297	2.89%	7,618
335	Hydrants	1,589	3.21%	51
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment	413,592	3.18%	13,172
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment	7,666	3.18%	244
346	Communication Equipment	12,576	2.43%	305
347	Miscellaneous Equipment			
348	Other Tangible Plant	665	2.86%	19
	TOTALS	2,593,477	3.08%	80,005

This amount goes on Comparative Statement of Income and Expense – Acct. No.403.

BALANCE SHEET

Acct.	BALANCE AT BEGINNING OF			ALANCE AT END OF	
No.	ASSETS	BE	YEAR	· •	
	CURRENT AND ACCRUED ASSETS				
131	Cash	\$	•••	\$	-
134	Working Funds				
135	Temporary Cash Investments				
141	Customer Accounts Receivable		15,955		21,853
146	Notes/Receivables from Associated Company				
151	Plant Materials and Supplies				
162	Prepayments				
174	Miscellaneous Current and Accrued Assets		101,543		113,546
	TOTAL CURRENT AND ACCRUED ASSETS	\$	117,498	\$	135,399
	FIXED ASSETS				
101	Utility Plant in Service	\$	2,536,649	\$	2,593,477
103	Property Held for Future Use				· · ·
105	Construction Work in Progress				
108	Accumulated Depreciation - Utility Plant		(1,411,990)		(1,491,994)
121	Not-Utlity Property			<u> </u>	
122	Accumulated Depreciation - Non Utility				· · · · · · · · · · · · · · · · · · ·
	TOTAL FIXED ASSETS	\$	1,124,659	\$	1,101,483
	DEFERRED INCOME TAX DEBITS	\$	516,000	\$	516,000
· · · · · · · · · · · · · · · · · · ·	TOTAL ASSETS	\$	1,758,157	\$	1,752,882

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page

BALANCE SHEET (CONTINUED)

Acct.	BALANCE AT BEGINNING OF			BA	LANCE AT END OF
No.	LIABILITIES		YEAR		
140.	LIADILITIES	 	I LAIX		ILAIN
	CURRENT LIABILITIES	 			
231	Accounts Payable	\$	537	\$	15,271
232	Notes Payable (Current Portion)	 	-		
234	Notes/Accounts Payable to Associated Company				
235	Customer Deposits		37,068		34,548
236	Accrued Taxes	1			
237	Accrued Interest				
241	Miscellaneous Current and Accrued Liabilities		29,284		9,383
	TOTAL CURRENT LIABILITIES	\$	66,889	\$	59,202
	LONG-TERM DEBT (Over 12 Months)	-			
224	Long-term Notes and Bonds	\$		\$	
224	Long-term Notes and bonds	*		4	
·	Deferred Credits				
251	Unamortized Premium on Debt				
	Refundable Meter Advances	\$	88,930	\$	80,271
252	Advances in Aid of Construction				
255	Accumulated Deferred Investment Tax Credits				
271	Contributions in Aid of Construction		883,744		883,744
272	Less: Amortization of Contributions		(443,224)		(471,503)
281	Accumulated Deferred Income Taxes				
 , <u>-</u>	TOTAL DEFERRED CREDITS	\$	529,450	\$	492,512
	TOTAL LIABILITIES	\$	596,339	\$	551,714
		+	000,000		
	CAPITAL ACCOUNTS	1	· · · · · · · · · · · · · · · · · · ·		·
201	Common Stock Issued	\$	646,630	\$	646,630
211	Paid In Capital in Excess of Par Value	1	364,385		364,385
215	Retained Earnings	1	150,803		190,153
218	Proprietary Capital (Sole Props & Partnerships)				
	TOTAL CAPITAL	\$	1,161,818	\$	1,201,168
	TOTAL LIABILITIES AND CAPITAL	\$	1,758,157	\$	1,752,882

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PR	IOR YEAR	CURI	RENT YEAR
461	Metered Water Revenue	\$	508,106	\$	508,165
460	Unmetered Water Revenue				
474	Other Water Revenues		9,862		8,131
,	TOTAL REVENUES	\$	517,968	\$	516,296
				·	
	OPERATING EXPENSES				
601	Salaries and Wages	\$	85,960	\$	111,707
610	Purchased Water		14,846		9,751
615	Purchased Power		47,751		39,570
618	Chemicals		470		1,878
620	Repairs & Maintenance			1	
621	Office Supplies and Expense				
630	Outside Services		25,121		48,843
635	Water Testing		9,413		14,624
641	Rents		4,120		924
650	Transportation Expenses		2,196		2,197
657	Insurance - General Liability				
659	Insurance - Health and Life		6,270		7,038
666	Regulatory Commission Expense - Rate Case		3,408		1,182
675	Miscellaneous Expense		61,243		102,451
403	Depreciation Expense		78,493		80,005
408	Taxes Other Than Income		32,116		32,872
408.11	Property Taxes		28,247		27,009
409	Income Tax				
	TOTAL OPERATING EXPENSES	\$	399,654	\$	480,051
	OPERATING INCOME/(LOSS)	\$	118,314	\$	36,245
	OTHER INCOME/EXPENSE				
419	Interest and Dividend Income	\$	-	\$	-
421	Non-Utility Income		730		4,774
426	Miscellaneous Non-Utility Expenses				
427	Interest Expense		(1,743)		(1,669)
	TOTAL OTHER INCOME/EXPENSE	\$	(1,013)		3,105
	NET INCOME/(LOSS)	\$	117,301	\$	39,350

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	9,	6 9	6 %	%
Current Year Interest	\$	\$	\$	\$
Current Year Principal	\$	\$	\$	\$

Meter Deposit Balance at Test Year End	\$
Meter Deposits Refunded During the Test Year	\$

Name of System: Mead's Ranch Water System ADEQ Public Water System Number (If applicable): PWS 04-015

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
				_		

^{*} Arizona Department of Water Resources Identification Number

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
None	N/A	N/A

BOOSTER PU	MPS	FIRE HYDRANTS		
Horsepower	Quantity	Quantity Standard	Quantity Other	

STORAGE T	ANKS	PRESSUR	E TANKS
Capacity	Quantity	Capacity	Quantity

COMPANY NAME: PAYSON WATER	R CO., INC.	
Name of System: Mead's Ranch Water System	ADEQ Public Water System Number (If applicable): PWS 04-015	

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X ³ / ₄	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category.				
TREATMENT EQUIPMENT:				
	· dra.			
STRUCTURES:				
OTHER:				

Name of System: East Verde Estates Water System ADEQ Public Water System Number (If applicable): PWS 04-026

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

^{*} Arizona Department of Water Resources Identification Number

	Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
None		N/A	N/A

BOOSTER PUMPS		FIRE I	HYDRANTS
Horsepower	Quantity	Quantity Standard	Quantity Other

STORAGE T	ANKS	PRESSUR	E TANKS
Capacity	Quantity	Capacity	Quantity

CONTROL A BITS I	BT A B ATES	TO A NATIONAL WAY A PERSON.	CO DIC
COMPANY	NAME:	PAYSON WATER	CO., INC.

Name of System: East Verde Estates Water System ADEQ Public Water System Number (If applicable): PWS 04-026

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
· · · · · · · · · · · · · · · · · · ·	Matchiai	Length (m leet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X ³ / ₄	_
3/4	
1	-
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category.			
TREATMENT EQUIPMENT:			
STRUCTURES:			
	.,		
OTHER:			

Name of System: Flowing Springs Water System

ADEQ Public Water System Number (If applicable): PWS 04-027

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

^{*} Arizona Department of Water Resources Identification Number

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
None	N/A	N/A

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
			,
	ŀ		

STORAGE TANKS		PRESSUR	E TANKS
Capacity	Quantity	Capacity	Quantity
		Į	

COMPANY NAM	and the	ATTOONE	WWY A PRODUCTION	CO TATO
TYDRADANIV NIAM	14' · 17		***	
**************************************	Lua L	ALOUN	AALVALLETA	

Name of System: Flowing Springs Water System ADEQ Public Water System Number (If applicable): PWS 04-027

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		
	,	

CUSTOMER METERS

ntit	i)	Size (in inches)
		5/8 X ³ / ₄
		3/4
		1
		1 1/2
		2
		Comp. 3
		Turbo 3
		Comp. 4
		Turbo 4
		Comp. 6
		Turbo 6

For the following three items, list the utility owned assets in each category.

TREATMENT EQUIPMENT:

STRUCTURES:

OTHER:

Name of System: Geronimo Estates Water System ADEQ Public Water System Number (If applicable): PWS 04-028

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

^{*} Arizona Department of Water Resources Identification Number

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
None	N/A	N/A

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
		1	

STORAGE TANKS		PRESSUR	E TANKS
Capacity	Quantity	Capacity	Quantity

COMPA	NY NAME:	PAVSON V	VATER CO	INC
3 .3 JIVI E A			Y /4 12 14 4 4 4	1111

Name of System: Geronimo Estates Water System ADEQ Public Water System Number (If applicable): PWS 04-028

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

1736410					
Size (in inches)	Material	Length (in feet)			
2					
3					
4	•				
5					
6					
8					
10					
12					
·					
<u></u>		_			

CUSTOMER METERS

CUSTOMER	
Size (in inches)	Quantity
5/8 X ³ / ₄	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category.			
TREATMENT EQUIPMENT:			
STRUCTURES:			
OTHER:			

Name of System: Mesa Del Caballo Water System ADEQ Public Water System Number (If applicable): PWS 04-030

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

^{*} Arizona Department of Water Resources Identification Number

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
None	N/A	N/A

BOOSTER PU	MPS	FIRE I	YDRANTS
Horsepower	Quantity	Quantity Standard	Quantity Other

STORAGE TANKS		PRESSURE TANKS		
Capacity	Quantity	Capacity	Quantity	
· · · · · · · · · · · · · · · · · · ·				

COMPANY NAME:	PAYSON WATER CO., INC.

Name of System: Mesa Del Caballo Water System ADEQ Public Water System Number (If applicable): PWS 04-030

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X ³ / ₄	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category.

TREATMENT EQUIPMENT:

STRUCTURES:

OTHER:

Name of System: Star Valley Water System ADEQ Public Water System Number (If applicable): PWS 04-037

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

^{*} Arizona Department of Water Resources Identification Number

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
None	N/A	N/A

BOOSTER PUMPS		FIRE HYDRANTS		
Horsepower	Quantity	Quantity Standard	Quantity Other	
		,		

STORAGE T	STORAGE TANKS		E TANKS	
Capacity	Quantity	Capacity	Quantity	
	•			

COMPANY NAME: PAYSON WAT	ER CO., INC.
Name of System: Star Valley Water System	ADEQ Public Water System Number (If applicable): PWS 04-037

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

TO /	A T	TRATE!
IV.	ΔA I	

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X ³ / ₄	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	···
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category.					
TREATMENT EQUIPMENT:					
STRUCTURES:					
OTHER:					

Name of System: Whispering Pines Water System ADEQ Public Water System Number (If applicable): PWS 04-039

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

^{*} Arizona Department of Water Resources Identification Number

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
None	N/A	N/A

BOOSTER PUMPS		FIRE HYDRANTS		
Horsepower	Quantity	Quantity Standard	Quantity Other	

STORAGE TANKS		PRESSURE TANKS		
Quantity	Capacity	Quantity		

ſ	COMPANY NAME:	PAYSON WATER	CO., INC.		

Name of System: Whispering Pines Water System ADEQ Public Water System Number (If applicable): PWS 04-039

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)				
2						
3						
4						
5						
6						
8						
10						
12						

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X ³ / ₄	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category.			
TREATMENT EQUIPMENT:			
STRUCTURES:			
OTHER:			
	······		

Name of System: Deer Creek Water System ADEQ Public Water System Number (If applicable): PWS 04-064

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

^{*} Arizona Department of Water Resources Identification Number

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
None	N/A	N/A

BOOSTER PUMPS		FIRE HYDRANTS		
Horsepower	Quantity	Quantity Standard	Quantity Other	

STORAGE T	STORAGE TANKS		E TANKS
Capacity	Quantity	Capacity	Quantity

COMPANY NAME: PAYSON WAT	ER CO., INC.	
Name of System: Deer Creek Water System	ADEO Public Water System Number (If applicable): PWS 04-064	

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X ³ / ₄	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	· · · · · · · · · · · · · · · · · · ·
Comp. 6	
Turbo 6	,

For the following three items, list the utility owned assets in each category.			
TREATMENT EQUIPMENT:			
STRUCTURES:			
OTHER:			

Name of System: Gisela Water System ADEQ Public Water System Number (If applicable): PWS 04-346

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
		<u> </u>				

^{*} Arizona Department of Water Resources Identification Number

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
None	N/A	N/A

BOOSTER PU	BOOSTER PUMPS		HYDRANTS
Horsepower	Quantity	Quantity Standard	Quantity Other

STORAGE T	STORAGE TANKS		E TANKS
Capacity	Quantity	Capacity	Quantity
		,	
		I .	

COMPANY NAME: PAYSON V	VATER CO., INC.	
Name of System: Gisela Water System	ADEO Public Water System Number (If applicable): PWS 04-346	

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2	17,200,000,000	Longon (m. 1000)
3	···	
4		
5		
6		
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X ³ / ₄	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category.

TREATMENT EQUIPMENT:

STRUCTURES:

OTHER:

COMPANY NAME: PAYSON WATER	CO., INC.	
Name of System: Mead's Ranch Water System	ADEQ Public Water System Number (If applicable): PWS 04-015	

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			•
(If more than one well, p If system has fire l	•	re flow requirement?	Mg/lGPM forhrs em chlorinate continuously?
() Yes	() No		
Is the Water Utilit	y located in an ADWR	Active Management	Area (AMA)?
() Yes	() No		
Does the Company	y have an ADWR Gallor	ns Per Capita Per Da	ay (GPCPD) requirement?
() Yes	() No		
If yes, provide the	GPCPD amount:		

COMPANY NAME: PAYSON WATER CO	O., INC.
Name of System: East Verde Estates Water System	ADEO Public Water System Number (If applicable): PWS 04-026

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD	GALLON PUMPED (Thousands)
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
	TOTAL		
(If more than one well, please	senic for each well on your s	-	
(If more than one well, please If system has fire hydr	senic for each well on your	equirement?G	PM forhrs
(If more than one well, please If system has fire hydr	senic for each well on your solist each separately.) cants, what is the fire flow re	equirement?G	PM forhrs
(If more than one well, please If system has fire hydr If system has chlorinat () Yes	senic for each well on your solist each separately.) rants, what is the fire flow retion treatment, does this tre	equirement?G atment system chlori	PM forhrs inate continuously?
(If more than one well, please If system has fire hydr If system has chlorinat () Yes	senic for each well on your solist each separately.) rants, what is the fire flow retion treatment, does this tre () No	equirement?G atment system chlori	PM forhrs inate continuously?
(If more than one well, please If system has fire hydr If system has chlorinat () Yes Is the Water Utility loc () Yes	senic for each well on your solist each separately.) cants, what is the fire flow retion treatment, does this tre () No cated in an ADWR Active N	equirement?G atment system chlori Ianagement Area (A	PM forhrs inate continuously? MA)?
(If more than one well, please If system has fire hydr If system has chlorinat () Yes Is the Water Utility loc () Yes	senic for each well on your solist each separately.) cants, what is the fire flow retion treatment, does this tre () No cated in an ADWR Active N	equirement?G atment system chlori Ianagement Area (A	PM forhrs inate continuously? MA)?

COMPANY NAME: PAYSON WATER C	O., INC.	
Name of System: Flowing Springs Water System	ADEO Public	Water System Number (If applicable): PWS 04-027

MONTH	i i	UMBER OF USTOMERS	GALLONS SOLD	GALLON PUMPED (Thousands)
JANUARY				
FEBRUARY		-		
MARCH				
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
	-	TOTAL		
(If more than one well, pla	ease list each separat	rely.)	system?	
(If more than one well, place in the last system has fire h	ease list each separat ydrants, what is	s the fire flow r	system?G equirement?G eatment system chlori	PM forhrs
(If more than one well, place in the last system has fire h	ease list each separat ydrants, what is	s the fire flow r	requirement?G	PM forhrs
(If more than one well, place If system has fire has chloricated as the chloricated as t	ease list each separate ydrants, what is ination treatment () No	ely.) s the fire flow r nt, does this tre	requirement?G	PM forhrs inate continuously?
(If more than one well, place If system has fire has chloricated as the chloricated as t	ease list each separate ydrants, what is ination treatment () No	ely.) s the fire flow r nt, does this tre	equirement?Geatment system chlor	PM forhrs inate continuously?
(If more than one well, place If system has fire has chloric () Yes Is the Water Utility () Yes	ease list each separate ydrants, what is nation treatmen () No located in an A	the fire flow rat, does this tre	equirement?Geatment system chlor	PM forhrs inate continuously? MA)?
(If more than one well, place If system has fire has chloric () Yes Is the Water Utility () Yes	ydrants, what is nation treatmen () No located in an A () No have an ADWR	the fire flow rat, does this tre	equirement?Geatment system chloridge Management Area (A	PM forhrs inate continuously? MA)?

COMPANY NAME: PAYSON WATER CO	o., INC.
Name of System: Geronimo Estates Water System	ADEO Public Water System Number (If applicable): PWS 04-028

MONTH	NUMBER OF	GALLONS	GALLONS PUMPED		
	CUSTOMERS	SOLD	(Thousands)		
JANUARY		(Thousands)			
FEBRUARY					
MARCH					
APRIL					
MAY	·	-			
JUNE					
JULY					
AUGUST	· 				
SEPTEMBER					
OCTOBER					
NOVEMBER					
DECEMBER					
TOTAL					
	f arsenic for each well (lease list each separately.)	on your system?	Mg/l		
If system has fire l	hydrants, what is the fir	e flow requirement?	GPM forhrs		
If system has chlor	rination treatment, does	s this treatment system	m chlorinate continuously?		
() Yes	() No				
Is the Water Utilit	y located in an ADWR	Active Management	Area (AMA)?		
() Yes	() No				
Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?					
() Yes	() No				
If yes, provide the	If yes, provide the GPCPD amount:				

COMPANY NAME: PAYSON WATER CO	o., INC.
Name of System: Mesa Del Caballo Water System	ADEO Public Water System Number (If applicable): PWS 04-030

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			-
OCTOBER			
NOVEMBER			
DECEMBER			
TOTAL			
	of arsenic for each well on the please list each separately.)	n your system?	Mg/l
If system has fire	hydrants, what is the fir	e flow requirement?	GPM forhrs
If system has chlo	rination treatment, does	this treatment exeter	m ablazinata cantinyayaky?
		tills treatment system	m cmormate continuously:
() Yes	() No	tills treatment system	m emormate continuously:
. ,	·	-	•
Is the Water Utili	() No	-	•
Is the Water Utili () Yes	() No ty located in an ADWR A	Active Management	·
Is the Water Utili () Yes Does the Compan	() No ty located in an ADWR A	Active Management	Area (AMA)?

COMPANY NAME: PAYSON WATER	R CO., INC.	
Name of System: Star Valley Water System	ADEQ Public Water System Number (If applicable): PWS 04-037	

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTAL			
	f arsenic for each well (lease list each separately.)	on your system?	Mg/l
If system has fire h	ydrants, what is the fir	e flow requirement?	GPM forhrs
If system has chlor	ination treatment, does	s this treatment syste	em chlorinate continuously?
() Yes	() No		
Is the Water Utilit	y located in an ADWR	Active Management	Area (AMA)?
() Yes	() No		
Does the Company	have an ADWR Gallo	ns Per Capita Per Da	ny (GPCPD) requirement?
() Yes	() No		
If yes, provide the	GPCPD amount:		

COMPANY NAME: PAYSON WATER CO	., INC.	
Name of System: Whispering Pines Water System	ADEO Public Water System Number (If applicable): PWS 04-039	

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTAL			
	of arsenic for each well on the please list each separately.)	n your system?	Mg/l
If system has fire	hydrants, what is the fir	e flow requirement?	GPM forhrs
If system has chlo	rination treatment, does	this treatment syste	em chlorinate continuously?
() Yes	() No		
Is the Water Utili	ty located in an ADWR	Active Management	Area (AMA)?
() Yes	() No		
Does the Compan	y have an ADWR Gallor	ns Per Capita Per Da	ay (GPCPD) requirement?
() Yes	() No		
	e GPCPD amount:		

COMPANY NAME: PAYSON WATER	CO., INC.	
Name of System: Deer Creek Water System	ADEQ Public Water System Number (If applicable): PWS 04-064	

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD	GALLONS PUMPED (Thousands)
		(Thousands)	(11104541145)
JANUARY			
FEBRUARY			
MARCH	· · · · · · · · · · · · · · · · · · ·		
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTAL			
	f arsenic for each well o lease list each separately.)	on your system?	Mg/l
If system has fire l	hydrants, what is the fir	re flow requirement?	GPM forhrs
If system has chlor	rination treatment, does	s this treatment system	m chlorinate continuously?
() Yes	() No		
Is the Water Utilit	y located in an ADWR	Active Management	Area (AMA)?
() Yes	() No		
Does the Company	y have an ADWR Gallor	as Per Capita Per Da	y (GPCPD) requirement?
() Yes	() No		
If yes, provide the	GPCPD amount:		

COMPANY NAME: PAYSON W.	ATER CO., INC.	
Name of System: Gisela Water System	ADEQ Public Water System Number (If applicable): PWS 04-346	•

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
	f arsenic for each well of lease list each separately.)	on your system?	Mg/l
-		_	GPM forhrs em chlorinate continuously?
ii system nas emui	mation treatment, does	tius treatment syste	in chrotimate continuously:
() Yes	() No		
Is the Water Utility	y located in an ADWR	Active Management	Area (AMA)?
() Yes	() No		
Does the Company	have an ADWR Gallon	ns Per Capita Per Da	ay (GPCPD) requirement?
() Yes	() No		
If yes, provide the	GPCPD amount:		

COMED A NINZ NI A NEED.	DAYCON WATER CO	TNIC
CUMPANY NAME:	PAYSON WATER CO	IINE

YEAR ENDING 12/31/2007

PROPERTY TAXES			
Amount of actual property taxes paid during Calendar Year 2007 was: \$			
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.			
If no property taxes paid, explain why			

VERIFICATION AND SWORN STATEMENT Taxes

RECEIVED

MAY 1 5 2008

	<u>Tax</u>	<u>es</u>		1 3 2008
			AZ CO	RP COMM or U tilities
VERIFICATION	COUNTY OF (COUNTY NAME)		Directo	or Utilities
STATE OF California	Кегп			
I, THE UNDERSIGNED	NAME (OWNER OR Robert T. Hardc			
	COMPANY NAME			
OF THE	PAYSON WATE	R CO., INC.]
DO SAY THAT THIS AND	NUAL UTILITY PR	OPERTY TAX AN	D SALES TAX RI	EPORT TO THE
ARIZONA CORPORATION	COMMISSION			
TOO DESCRIPTION AND A TO TOWN TO MAKE A TO	MONT		YEAR	
FOR THE YEAR ENDING	<u> 12</u>	31	2007	
CORRECT STATE PERIOD COVERS MATTER AND S INFORMATION A SWORN STATEMENT	ED BY THIS RE THING SET FOR	PORT IN RESP	ECT TO EACH	AND EVERY
I HEREBY ATTEST AND PAID IN FULL		CRTY TAXES FOR	SAID COMPANY	ARE CURRENT
I HEREBY ATTEST PAID IN FULL.		TURE OF OWNER OR OFFICEA	LA.	CURRENT AND
SUBSCRIBED AND SWORN TO	D BEFORE ME	TELEPHONE NUMBER		
A NOTARY PUBLIC IN AND FO	OR THE COUNTY OF	COUNTY NAME		7
THIS				
11113	DAY OF	MONTH	.20	

(SEAL)

MY COMMISSION EXPIRES

SIGNATURE OF NOTARY PUBLIC

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California County of Kern On May 14, 2008, before me, Denys Thede, Notary Public, personally appeared Robert T. Hardcastle, proved to me on the basis of satisfactory evidence to be the name is subscribed to the within instrument and acknowledged to me that he exercise authorized capacity, and that by his signature on the instrument the person, or hard to find the county of the cou	cuted the same in
DENYSTHEDE Commission # 1668410 Notary Public - California Kern County My Comm. Expires May 20, 2010 OPTIONAL WITNESS my hand and official WITNESS my hand and official Application of the county of	al seal.
Description of Attached Document Title or Type of Document:	
Document Date: Number of pages:	
Signer(s) other than named above:	
Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer - Title(s): Partner - Limited General Attorney in Fact Trustee Guardian or Conservator Other:	Right thumbprint of signer Top of thumb here
Signer is representing:	

YEAR ENDING 12/31/2007

INCOME TAXES

For this reporting period, provide the following:		
Federal Taxable Income Reported	\$	
Estimated or Actual Federal Tax Liability	\$ 0	
State Taxable Income Reported	\$	
Estimated or Actual State Tax Liability	\$ 0	
Amount of Grossed-Up Contributions/Advances:		
Amount of Contributions/Advances		
Amount of Gross-Up Tax Collected		
Total Grossed-Up Contributions/Advances	 	

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE

PRINTED NAME

DATE

39

VERIFICATION AND SWORN STATEMENT Intrastate Revenues Only

RECEIVED

VERIFICATION

STATE OF California

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)

Kern

NAME (OWNER OR OFFICIAL) TITLE

Robert T. Hardcastle

COMPANY NAME: PAYSON WATER CO., INC.

PAYSON WATER CO., INC.

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

 MONTH
 DAY
 YEAR

 12
 31
 2007

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE</u> UTILITY OPERATIONS DURING CALENDAR YEAR 2007 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 521,067.78

(THE AMOUNT IN BOX ABOVE INCLUDES \$
IN SALES TAXES BILLED, OR COLLECTED)

**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

DAY OF

MONTH .20__

CNATURE OF OWNER OR OFFICIAL

(661) 633-7526 TELEPHONE NUMBER

(SEAL)

MY COMMISSION EXPIRES

SIGNATURE OF NOTARY PUBLIC

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California County of Kern ss.	
On May 14, 2008, before me, Denys Thede, Notary Public, personally appeared Robert T. Hardcastle, proved to me on the basis of satisfactory evidence to be the name is subscribed to the within instrument and acknowledged to me that he exe his authorized capacity, and that by his signature on the instrument the person, o behalf of which the person acted, executed the instrument.	cuted the same in
DENYS THEDE Commission # 1668410 Notary Public - California Kem County My Comm. Expires May 20, 2010 Description of Attached Document	al seal.
Title or Type of Document:	
Document Date: Number of pages:	
Signer(s) other than named above:	
Capacity(ies) Claimed by Signer Signer's Name:	
☐ Individual ☐ Corporate Officer - Title(s):	Right thumbprint of signer
☐ Partner - ☐ Limited ☐ General	Top of thumb here
☐ Attorney in Fact ☐ Trustee	
☐ Guardian or Conservator ☐ Other:	-
Signer is representing:	

VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE

RECEIVED

MAY 1 5 2008

VERIFICATION

INTRASTATE REVENUES ONLY

			A	Z CORP COMM
STATE OF ARIZONA	COUNTY OF (COUNTY NAME) KE	RN	j	Director Utilities
, THE UNDERSIGNED	NAME (OWNER OR OFFICIAL)	ROBERT T. HARDCASTL	E TITLE: MA	NAGING MEMBER
OF THE	COMPANY NAME: PAYSON WATE	ER CO., INC.		
O SAY THAT THIS ANNUA	L UTILITY REPORT	TO THE ARIZO	NA CORPORAT	TION COMMISSION
OR THE YEAR ENDING	MONTH DAY 12 31	YEAR 2007		
RECORDS OF SAID I THE SAME TO BE A C UTILITY FOR THE	JTILITY; THAT I HAV COMPLETE AND COR PERIOD COVERED F	VE CAREFULLY RECT STATEMI BY THIS REPOR	EXAMINED THE ENT OF BUSINES ET IN RESPECT	L BOOKS, PAPERS A E SAME, AND DECLA S AND AFFAIRS OF SA TO EACH AND EVE GE, INFORMATION A
	/ITH THE REQUIRE STATUTES, IT IS UTILITY DERIVED SIDENTIAL CUSTOM	HEREIN REPOI FROM <u>ARIZON</u> ERS DURING CA	RTED THAT THA INTRASTATE LENDAR YEAR TOUNT IN BOX A	IE GROSS OPERATION OPERATI
\$ 521,0		INCLUDI IN SALES		, OR COLLECTED)
*RESIDENTIAL REVENU MUST INCLUDE SALES		SPAGE	SIGNATURE OF OWNE	7526
SUBSCRIBED	AND SWORN TO BEFO	ORE ME	NOTARY PUBLIC NAME	
A NOTARY PU	BLIC IN AND FOR TH	E COUNTY OF	COUNTY NAME	
THIS	D	AY OF	монтн	,20
A NOTARY PU	BLIC IN AND FOR TH	E COUNTY OF	NOTARY PUBLIC NAME COUNTY NAME	
(SEAL)		X		

MY COMMISSION EXPIRES

SIGNATURE OF NOTARY PUBLIC

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California County of Kern ss.	
On May 14, 2008, before me, Denys Thede, Notary Public, personally apperature Robert T. Hardcastle, proved to me on the basis of satisfactory evidence to name is subscribed to the within instrument and acknowledged to me that he has authorized capacity, and that by his signature on the instrument the personal behalf of which the personacted, executed the instrument.	be the person whose e executed the same in
DENYS THEDE Commission # 1668410 Notary Public - California Kern County My Comm. Expires May 20, 2010 OPTIONAL	official seal.
Description of Attached Document Title or Type of Document:	
Document Date: Number of pages:	
Signer(s) other than named above:	
Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer - Title(s): Partner - Limited General Attorney in Fact Trustee Guardian or Conservator Other:	Right thumbprint of signer Top of thumb here
Signer is representing:	